International Union Against Tuberculosis: Meets in Lisbon in September. — The tenth conference of the International Union Against Tuberculosis will meet in Lisbon, Portugal, September 7-10, 1936, under the chair-manship of Prof. Lopo de Carvalho, president-elect of the Union. The biologic subject, "Radiologic Aspects of the Pulmonary Hilum and Their Interpretation," will be presented by Prof. Lopo de Carvalho. Among the ten countries to take part in the formal discussion, the United States will be represented by Dr. Henry C. Sweany, Medical Director of Research of the Chicago Municipal Tuberculosis Sanitarium. The report on the clinical subject, "Primary Tuberculous Infection in the Adolescent and the Adult," will be given by Dr. Olaf Scheel of Nor-way, and Dr. Robert E. Plunkett, Director of the Division way, and Dr. Robert E. Plunkett, Director of the Division of Tuberculosis, New York State Department of Health, will represent the United States in the discussion. The opening report on the social subject, "The Open Case of Tuberculosis in Relation to Family and Domestic Associates," will be presented jointly by Dr. Charles J. Hatfield, Director of Henry Phipps Institute, Philadelphia, Pennsylvania, and Dr. D. A. Powell, representing Great Britain. The Organization Committee of the conference has secured reductions in hotel prices and railroad fares. It has also prepared an attractive program of receptions and excursions to enable members of the conference to visit the chief anti-tuberculosis institutions of Portugal and, in addition, to see some of the most picturesque scenery of the country. Members of the Union are invited to take part in the conference without payment of a fee. Other persons may participate as "members of the conference," and application should be made through the National Tuberculosis Association, 50 West Fiftieth Street, New York. Plans for a special party to the conference may also be secured by writing to the Association.

LETTERS

Concerning federal survey of chronic diseases.

TREASURY DEPARTMENT UNITED STATES PUBLIC HEALTH SERVICE

March 7, 1936.

To the Editor: - The United States Public Health Service survey for chronic diseases is nearing a close. The most important work to be done now is making this data of valuable scientific use by getting the confirmation of the diagnoses from the family physicians. I trust that you can give us some publicity in the next issue of CALIFORNIA AND WESTERN MEDICINE

I am enclosing a brief statement and enclosure for this

Thanking you for your extreme courtesy to me in the matter of this survey, I am

Yours sincerely,
ARTHUR HIERONYMUS, M. D., Assistant Regional Supervisor for California. Office of Health Survey 208 Builders Exchange Building Hobart and Webster Streets

Oakland, California

STATEMENT OF REGIONAL DIRECTOR

The United States Public Health survey for chronic diseases and disabling illnesses is nearing a close. The important work of making this data of valuable scientific use is now to be undertaken. It will be necessary in the near future for the family physician to confirm the diagnosis of every disease reported. Permission has been granted by the informant in every instance for the doctor to confidentially report on a special form to the Surgeon-

General of the United States direct. These forms are very brief and simple, requiring in most instances merely a check mark of the diagnosis in question. The doctor is not required to sign the statement. This statement will be treated as strictly confidential, used only for statistical purposes and at all times under the direct supervision of a medical officer of the United States Public Health Service, thus complying with the ethical standards of the medical profession.

The doctors will soon be receiving these forms with a letter of explanation from the Surgeon-General, and he hopes for their coöperation.

The sum of \$200,000 has been set aside to pay physicians 25 cents each for the diagnoses they confirm.

It is hoped that physicians will respond promptly and whole-heartedly to the Surgeon-General's request, to the end that the reliability of the medical data may be assured.

COPY OF FORM LETTER TO BE SENT TO PHYSICIANS Treasury Department Public Health Service Washington

Dear Doctor:-The National Health Survey, intended to provide information about chronic and other illnesses, has been making good progress in your community. Among the families interviewed, the enclosed cases of illness were reported as having been attended by you. In every instance the family was asked if there would be any objection if I wrote you for further information. The fact that I am writing you means that the family raised no objection.

The enclosed form * contains the information given to the enumerator. If the information is incorrect or only partially correct, your help is solicited in correcting errors. You will note that important additional information is asked concerning the case. Obviously such information is important and reliable only when it comes from the physician who treated the patient.

Out of the total fund allotted for the study the sum of \$200,000 has been set aside to pay physicians 25 cents each for diagnoses they confirm. To insure reimbursement for this service it is requested that you sign the certification in the space provided for this purpose on two copies of the enclosed invoice, insert the date in the heading, and return the first two copies together with the confirmation forms to this office. A check will then be prepared in the proper amount and sent to you as soon as possible.

Sincerely yours, W. F. DRAPER, Acting Surgeon-General.

Concerning Appellate Court decision in Kern County Hospital Case.†

Association of California Hospitals

March 4, 1936.

To the Editor: —As editor of California and Western MEDICINE and councilor of the California Medical Association, I wish to call your attention to the decision of the Court of Appeal in the Kern County case. There are some very interesting interpretations by the Court in this case which are of vital importance to doctors and hospi-You are probably acquainted with these facts, but I merely enumerate them as follows:

First: The constitutional law prohibits cities and coun-

ties from making any gifts of public funds. Second: Definition of "indigency."

Third: Responsibility of supervisors to segregate costs of various types of patients.

Fourth: The responsibility of supervisors to make accurate accounting, including depreciation, interest on invest-

ment, etc.

The political activities of the supervisors in the farm counties are particularly important, which is reflected in editorials in practically all of the San Joaquin valley newspapers. All of these editorials favor more liberal laws for hospitalization in county institutions. We sense in these editorials an inclination to publicize and distort facts to taxpayers in order to secure new laws permitting free hospitalization to all classes of the public. We have had a number of these editorials clipped and mounted, and I am having our office in San Francisco deliver some of them to the California Medical Association's office so that the officers of the Association may be familiar with some of these facts. Very truly yours,

> Association of California Hospitals. By Mr. R. E. Heerman, President.

1414 South Hope Street, Los Angeles.

^{*}Owing to lack of space, H. S. forms 420, United States Public Health Service, and 42-c, 42-d, 42-e, are not reprinted in California and Western Medicine.

[†] For full opinion of the Appellate Court decision, see page 189, March issue, California and Western Medicine.